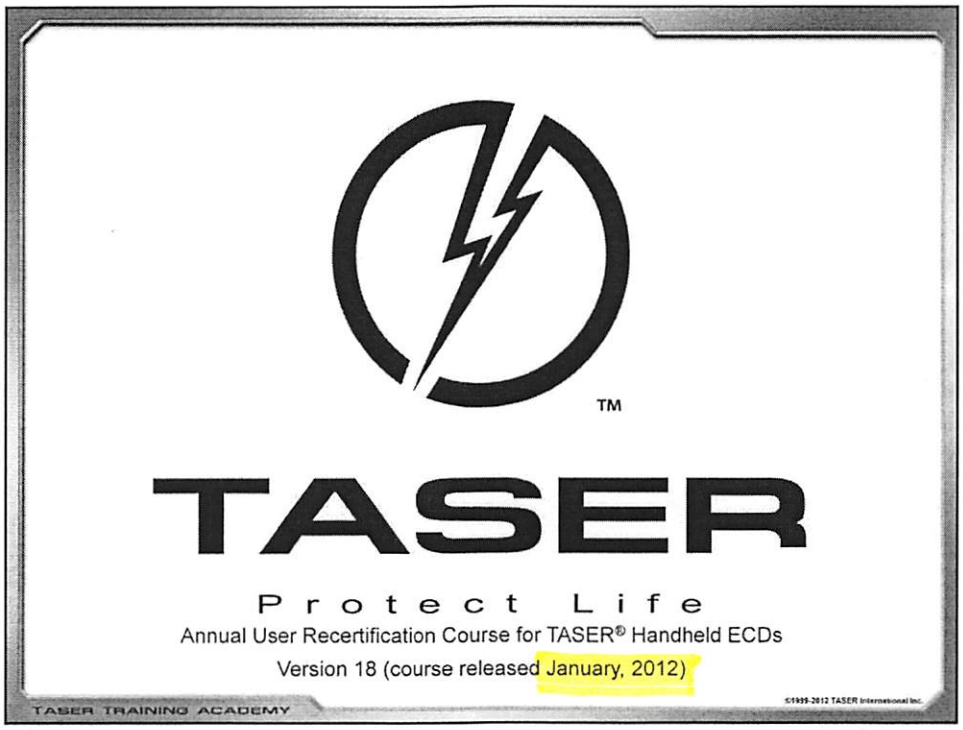
EXHIBIT 6



This course is designed to assist law enforcement agencies in the development of their annual user recertification courses for TASER electronic control devices (ECDs). TASER's annual recertification program requires that users successfully perform manipulation drills and fire 2 cartridges as part of their annual recertification. There is also an optional test available for your consideration.

This course does *not* replace the current ECD User Training Program. Always ensure that you review your department's policies and relevant case law. As with any TASER training, each law enforcement agency is solely responsible for its training programs and use of force policies.

By providing these materials, TASER does not give and is not giving legal advice or guidance or creating or forming any form of attorney/client or other relationship. Be sure to consult with your personal, local, law enforcement agency, or governmental legal advisor for any legal advice, guidance, training, or direction.

See the following resources:

- 2011 Electronic Control Weapon Guidelines, A joint project of Police Executive Research Forum and Community Oriented Policing Services, U.S Department of Justice.

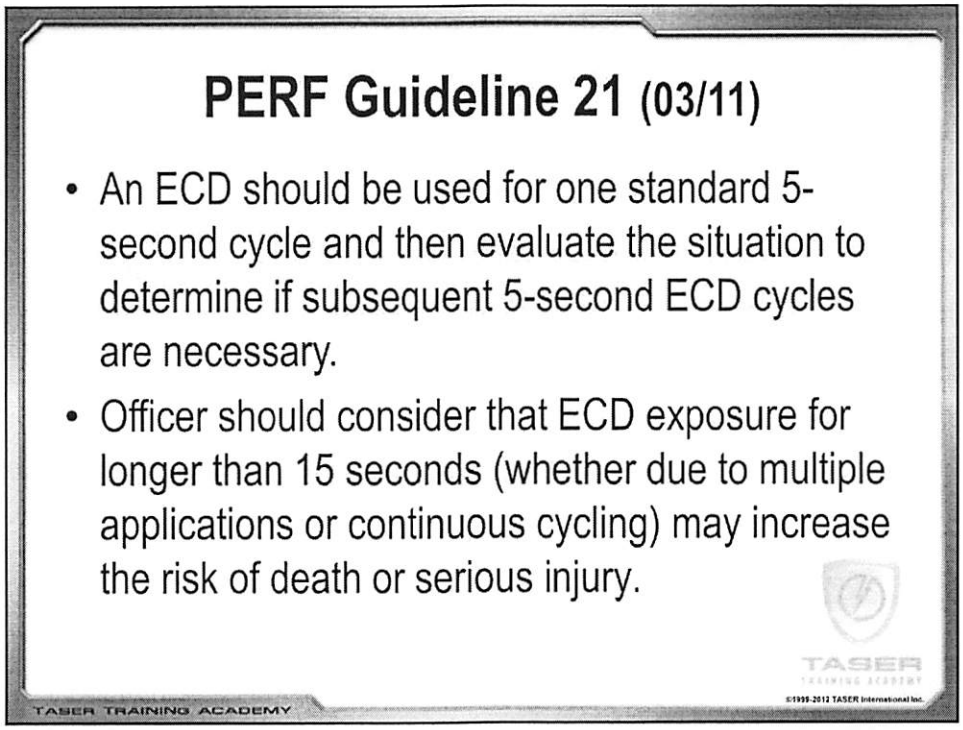
  PERF Guideline 21. "Personnel should use an ECW for one standard cycle (five seconds) and then evaluate the situation to determine if subsequent cycles are necessary. Personnel should consider that exposure to the ECW for longer than 15 seconds (whether due to multiple applications or continuous cycling) may increase the risk of death or serious injury. Any subsequent applications should be independently justifiable, and the risks should be weighed against other force options."

- International Association of Chiefs of Police ("IACP") Model Policy, Electronic Control Weapons, April 2010, and IACP National Law Enforcement Policy Center, Electronic Control Weapons, Concepts and Issues Paper, April 2010.

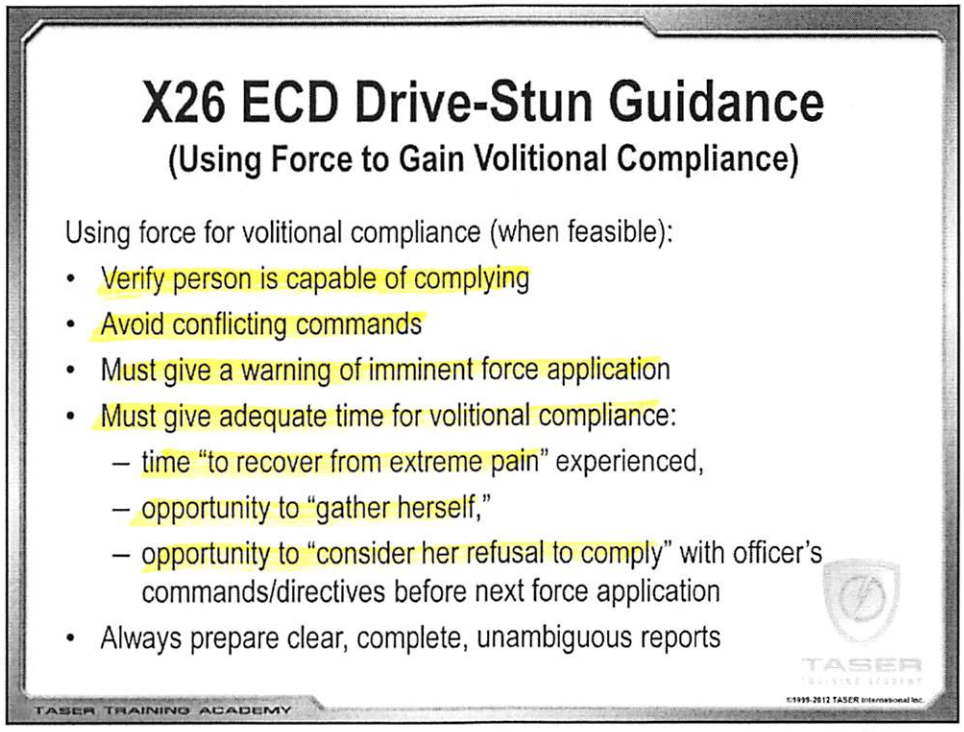
- Vilke GM, Bozeman WP, Chan TC. Emergency Department Evaluation after Conducted Energy Weapon Use: Review of the Literature for the Clinician. J Emerg Med. May 2011;40(5):598-604.

- Laub J. Study of Deaths Following Electro Muscular Disruption. National Institute of Justice. May 2011.

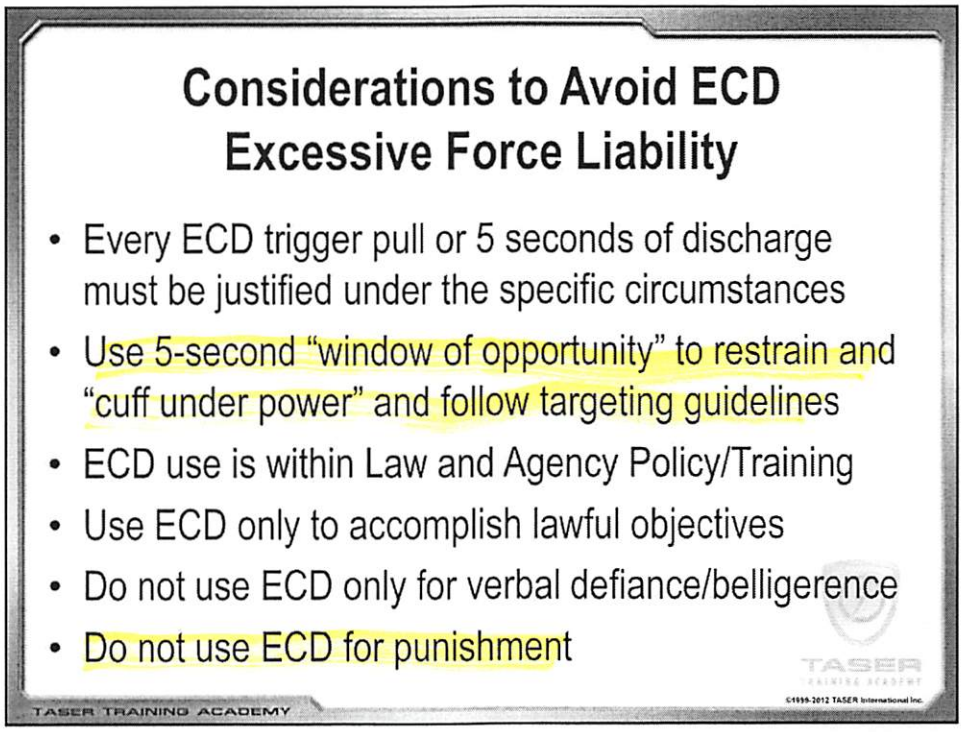
  "Because the physiologic effects of prolonged or repeated CED exposure are not fully understood, law enforcement officers should refrain, when possible, from continuous activations of greater than 15 seconds, as few studies have reported on longer time frames."

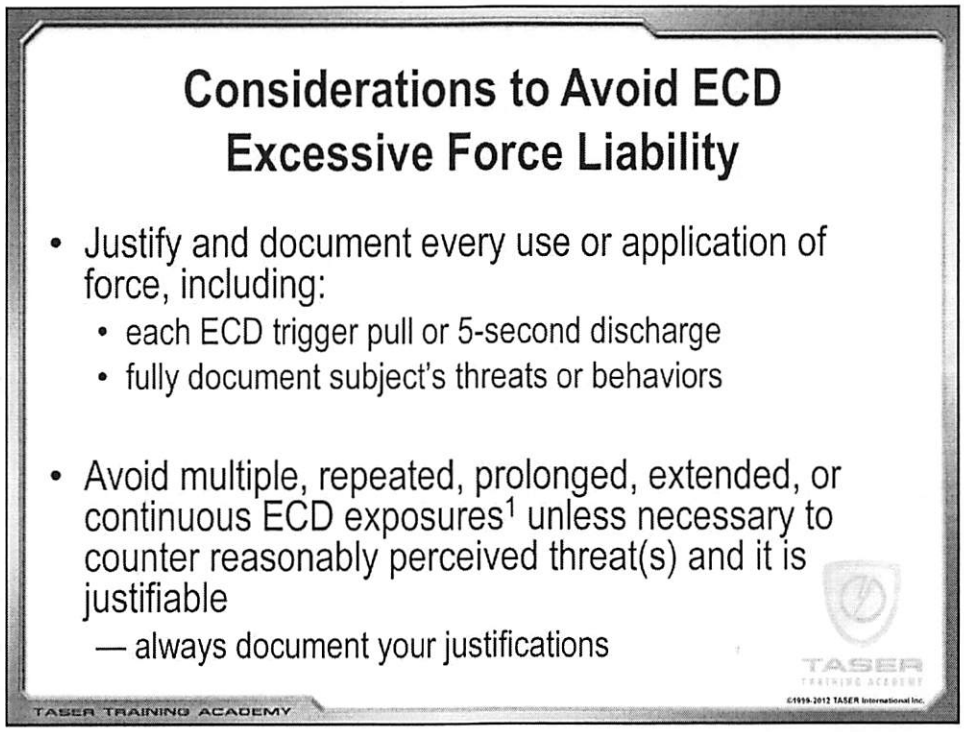


See full document: 2011 Electronic Control Weapon Guidelines, A joint project of Police Executive Research Forum and Community Oriented Policing Services, U.S Department of Justice.



See *Mattos v. Agarano*, 661 F.3d 433 (9th Cir. (Hawaii), October 17, 2011) [includes the *Brooks v. Seattle* (WA) *en banc* decision].


Considerations to Avoid ECD Excessive Force Liability
• Every ECD trigger pull or 5 seconds of discharge must be justified under the specific circumstances
• Use 5-second "window of opportunity" to restrain and "cuff under power" and follow targeting guidelines
• ECD use is within Law and Agency Policy/Training
• Use ECD only to accomplish lawful objectives
• Do not use ECD only for verbal defiance/belligerence
• Do not use ECD for punishment
TASER TRAINING ACADEMY



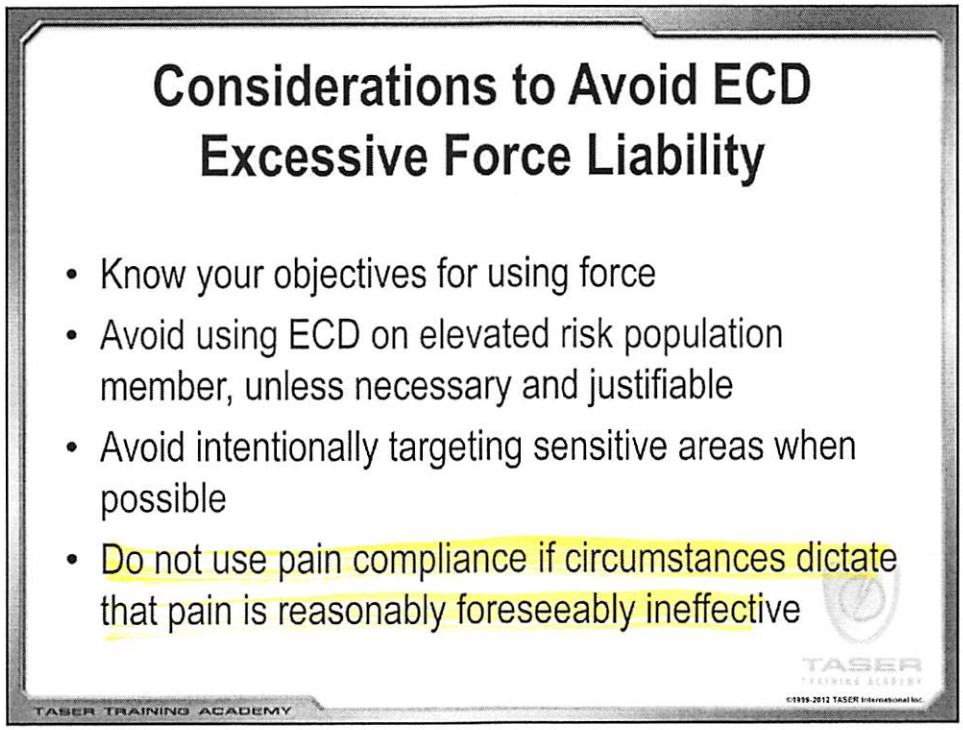
Numerous allegations of misuse regarding ECD deployment/use emanate from allegations including:

- ECD deployment(s) where it is alleged that the ECD should not have been deployed/used at all – that ECD use was not justified.
- ECD deployment(s) on a person in a special population (such as with a mental illness).
- Multiple ECD deployments in drive-stun mode where the ECD can only foreseeably be utilized for discomfort compliance.
- Repeated, extended, prolonged, or continuous ECD deployments where it is alleged that the officer(s) had opportunities to control ("window of opportunity" to "cuff under power") and failed to do so.

Thus, it is important for officers to fully understand and appreciate:

- Their objectives in deploying/discharging an ECD;
- Whether they can legally deploy/discharge an ECD;
- How many ECD deployments or discharges are legally acceptable; and
- Whether the officers have taken reasonable and appropriate steps/actions to appropriately minimize the number of ECD exposures/discharges; including utilizing the "window of opportunity" and "cuffing under power".

1. Bozeman W, II WH, Heck J, Graham D, Martin B, Winslow J., Safety and Injury Profile of Conducted Electrical Weapons Used by Law Enforcement Officer Against Criminal Suspects, Annals of Emergency Medicine, January 2009, defines ECD


Considerations to Avoid ECD Excessive Force Liability
• Know your objectives for using force
• Avoid using ECD on elevated risk population member, unless necessary and justifiable
• Avoid intentionally targeting sensitive areas when possible
• Do not use pain compliance if circumstances dictate that pain is reasonably foreseeably ineffective
TASER TRAINING ACADEMY
TASER
TRAINING ACADEMY
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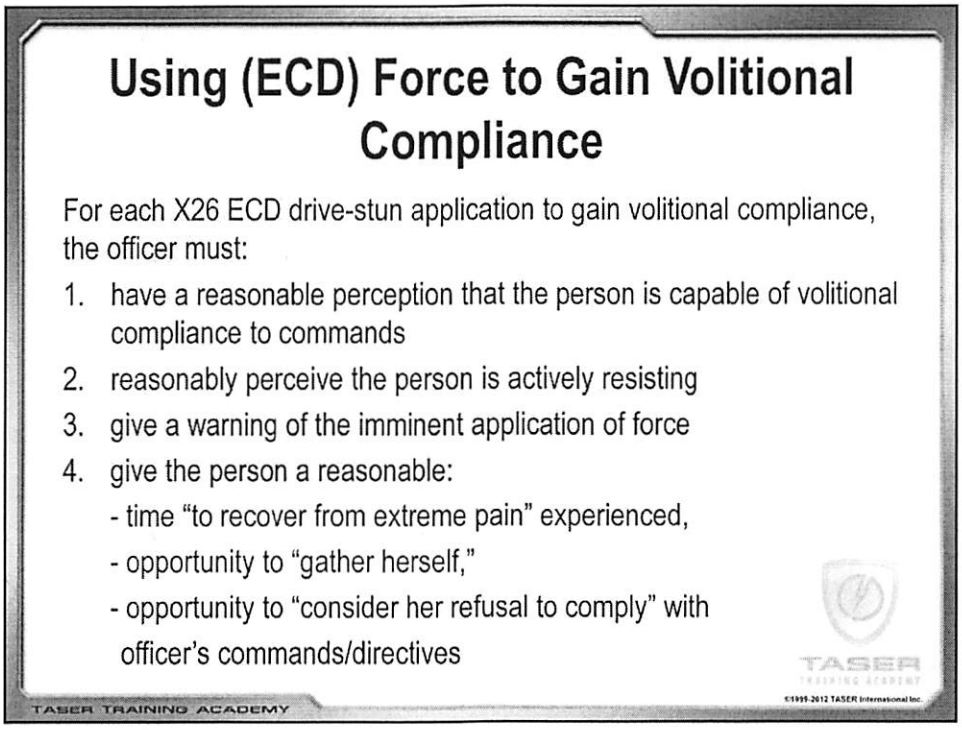
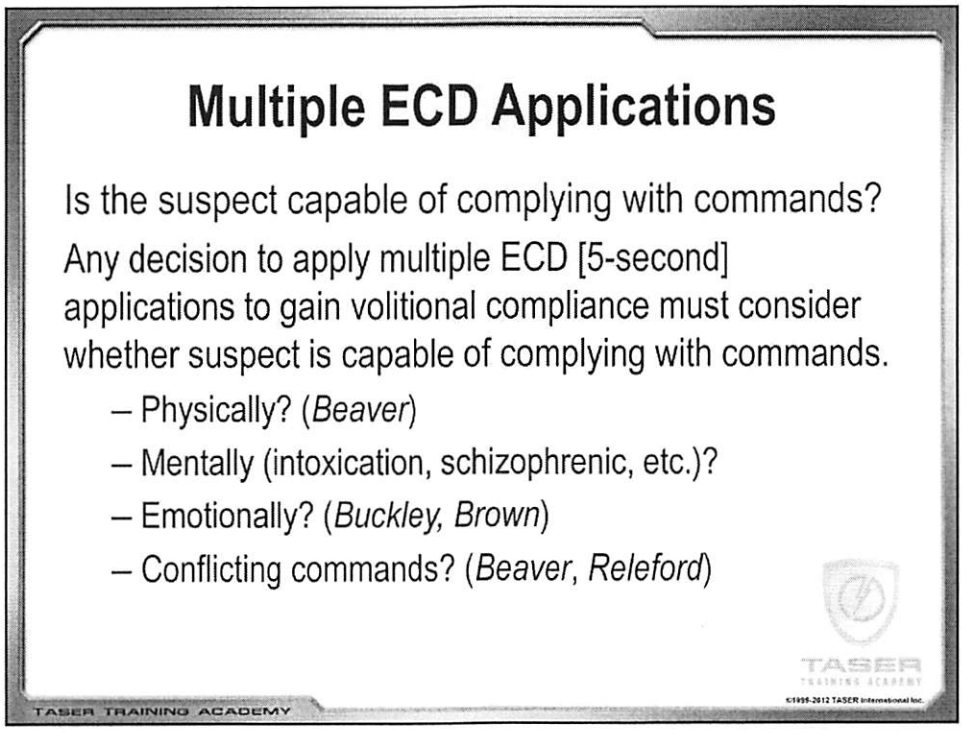
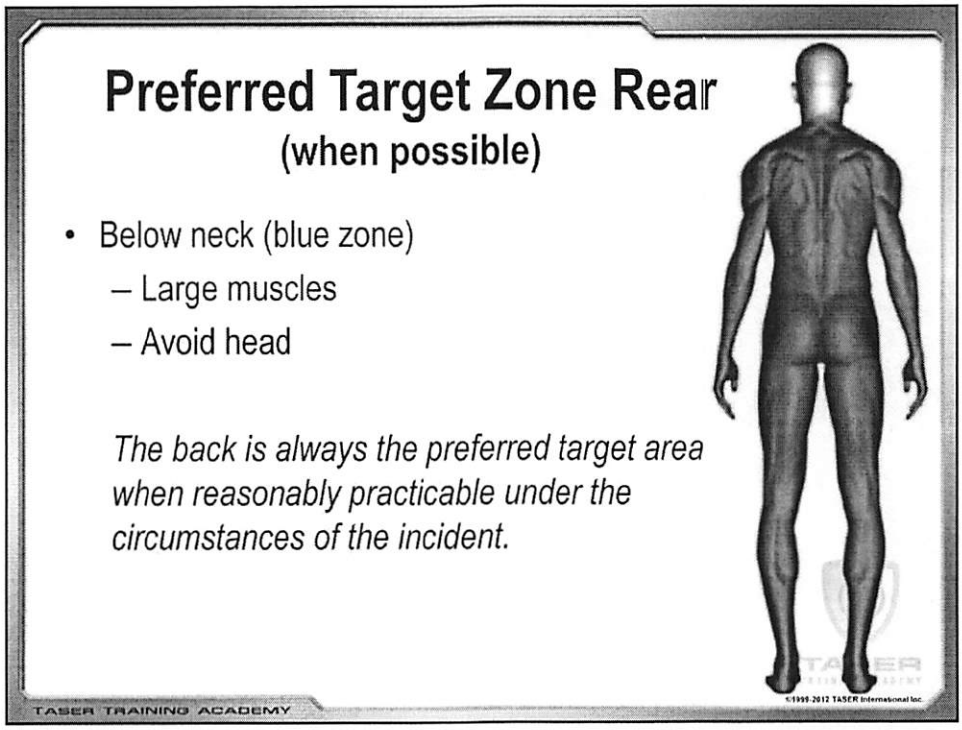


See *Mattos v. Agarano*, 661 F.3d 433 (9th Cir. (Hawaii), October 17, 2011) [includes the *Brooks v. Seattle* (WA) case]

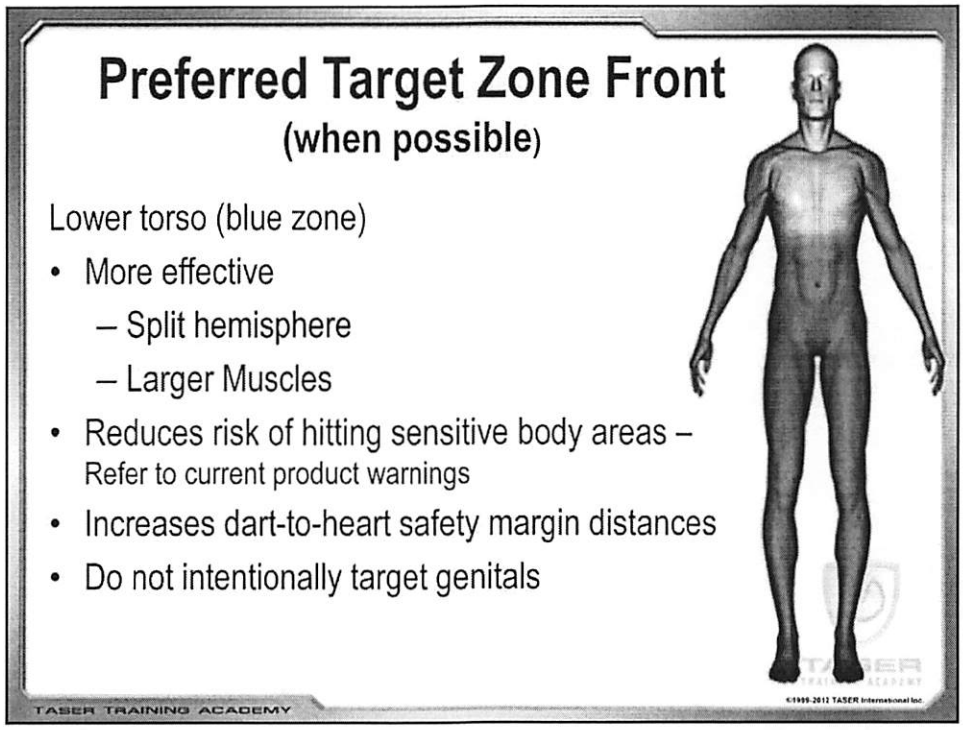
In the *Brooks* matter the court found that she "actively resisted arrest insofar as she refused to get out of her car when instructed to do so and stiffened her body and clutched her steering wheel to frustrate the officers' efforts to remove her from her car."



See:
Mattos v. Agarano, 661 F.3d 433 (9th Cir. (Hawaii), October 17, 2011).
Buckley v. Haddock, 292 Fed.Appx. 791 (11th Cir. (Fla.) 2008), *cert denied* May 18, 2009.
Brown v. City of Golden Valley, 574 F.3d 491 (8th Cir. (Minn) 2009).
Releford v. City of Tukwila, CASE NO. C07-2009-RSM (W.D.Wash. 2008).



Because of the larger muscle groups, the preferred target zone on the back begins just below the neck and extends all the way down the legs.



Target Zone:

There have been some ineffective hits to the front of the body, particularly with hits to the upper torso with narrow probe spreads. By lowering the point of aim to the lower torso on the front of the body by about four inches (4"), the potential for Neuro Muscular Incapacitation (NMI) is often increased by splitting the hemispheres of the body and targeting larger muscle groups. Aiming for the lower torso also reduces the risk of hitting some sensitive body areas.

Non-preferred target zones are NOT prohibited, rather they should be avoided when practical.

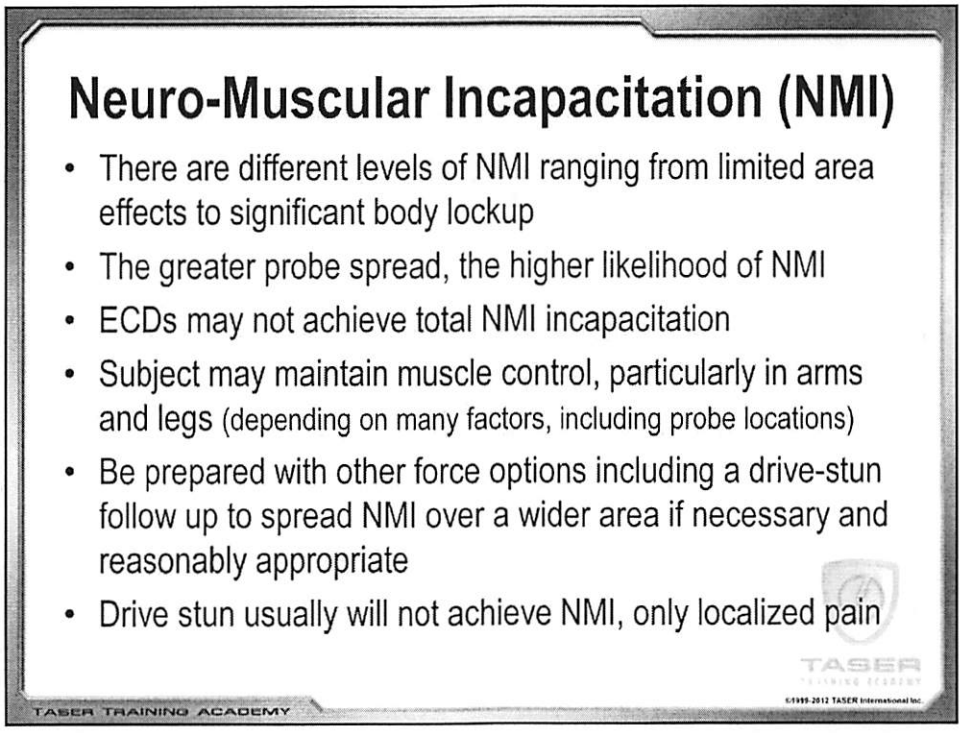
Dart-to-heart distance:

Experts have identified the heart-to-dart distance and whether the probes traverse the heart (transcardiac) as being key determining factors in whether an ECD can affect the heart. The ventricular fibrillation (VF), ventricular tachycardia (VT), and cardiac capture or pacing probability for given dart locations decreased with the dart-to-heart horizontal distance (radius) on the skin surface. The further an ECD dart is away from the heart, the lower the risk of affecting the heart.

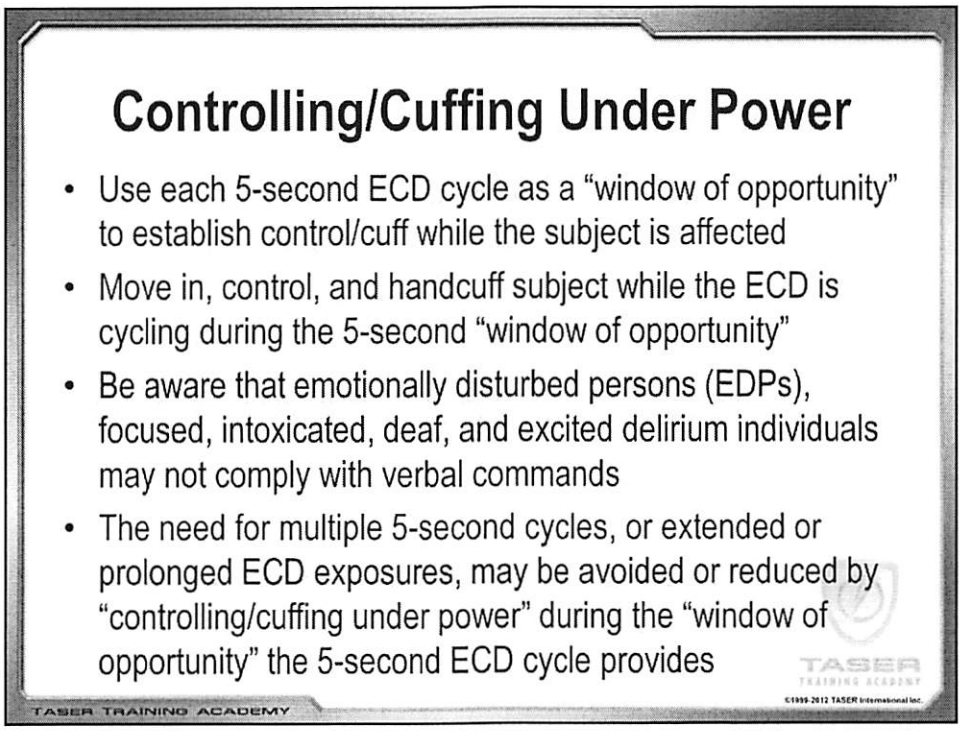
The risk of an ECD causing cardiac arrest in humans is not zero, but is sufficiently remote that making accurate estimates is very difficult. Current estimates of the risk are on the order of 1 in 100,000 applications.

- See, Kroll M, Lakkireddy D, Rahko P, Panescu D. Ventricular Fibrillation Risk Estimation for Conducted Electrical Weapons: Critical Convolutions. Medline IEEE 2011.

- Sun H, Haemmerich D, Rahko PS, Webster JG. Estimating the probability that the Taser directly causes human ventricular fibrillation. J Med Eng Technol. Apr 2010;34(3):178-191.

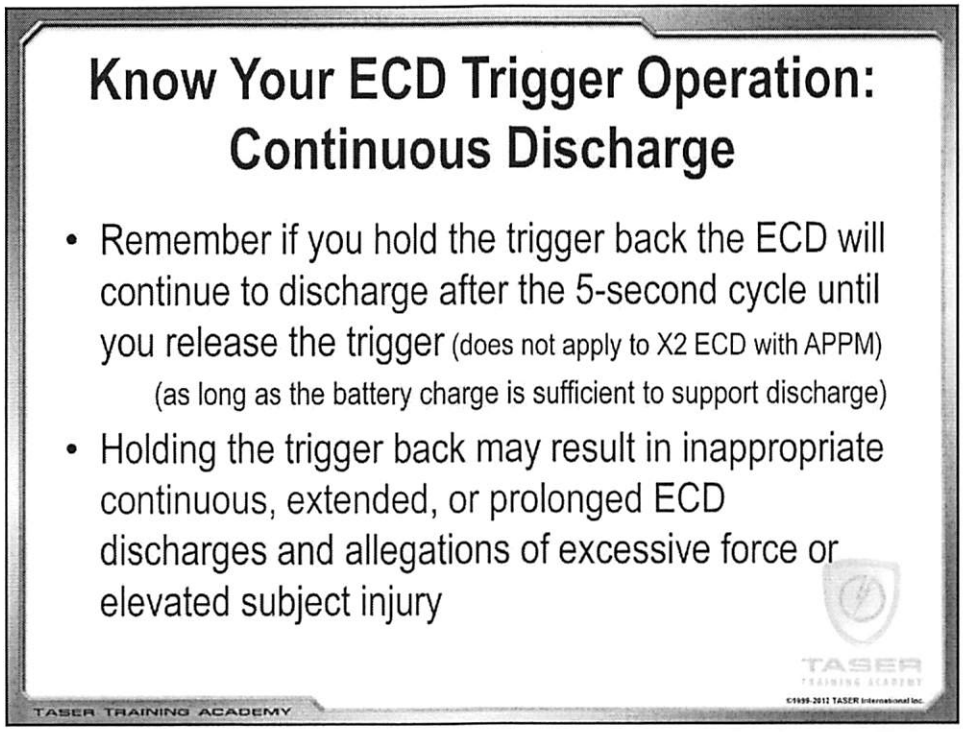


Even with both probes making contact in a preferred target zone with a large spread, a subject may be able to voluntarily move his arms and legs. The subject might be able to access and manipulate a weapon or strike/kick at an approaching officer. When reasonably safe and practicable, officers should attempt to gain physical control of a subject as quickly as possible to restrict their movement and minimize any threats.



There have been incidents where subjects have been exposed to multiple TASER ECD cycles because the subject would not comply with verbal surrender commands following a TASER ECD deployment. Contact officers were available but did not move in during the cycle while the subject was incapacitated. While there are circumstances under which multiple cycles may be appropriate and reasonable, officers should consider an attempt to move in and control the subject while the TASER ECD is cycling and it is practical and reasonably safe to do so.

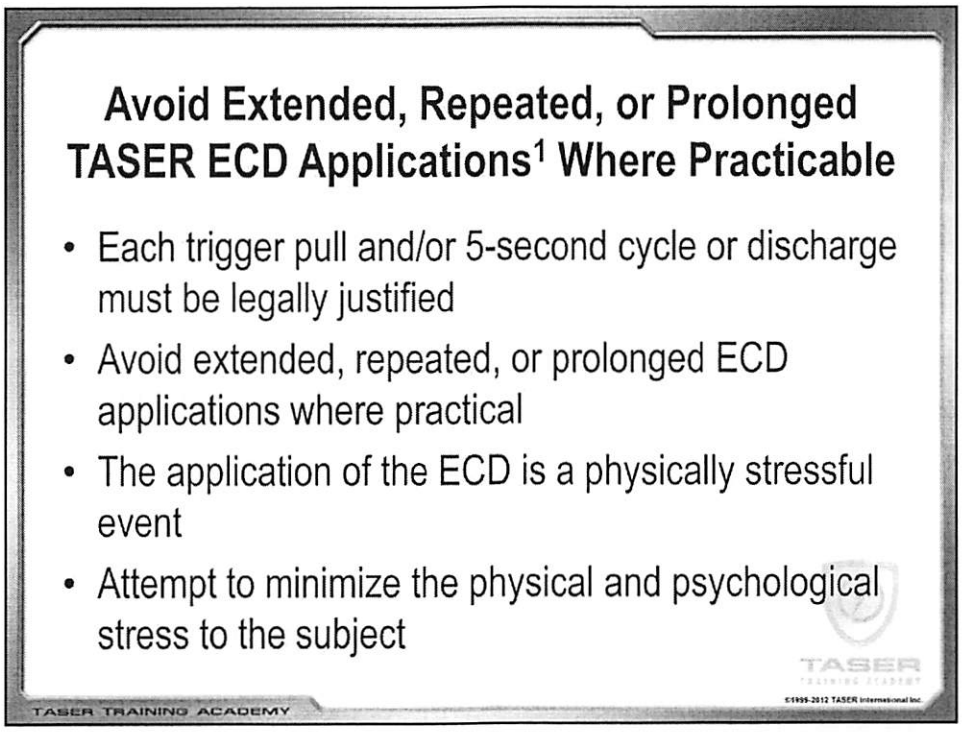
Remember, as with any application of force, each ECD (5-second) cycle, deployment, or trigger pull must be legally justified.



Review the trigger operation of your particular ECD model (all TASER ECD models do not operate the same).

Trigger-Held Continuous Discharge. If an ECD's trigger is held back (on all but the X2 ECD with an APPM), it can continue to discharge beyond the 5-second cycle until the trigger is released or the power source is expended.

5-Second Discharge Cutoff and Trigger Reactivation Necessity for an X2 ECD with an APPM. The X2 ECD may be programmed with an optional automatic shut-down feature (the APPM) that will stop a continual trigger discharge at 5 seconds (even if the user continues to hold back the trigger) and require an additional trigger pull by the user for an additional cycle. The X2 ECD programmed with the APPM emits an audible alert 4 seconds into the ECD output cycle. Under high stress circumstances or noisy environments, the user may not hear the audible warning.

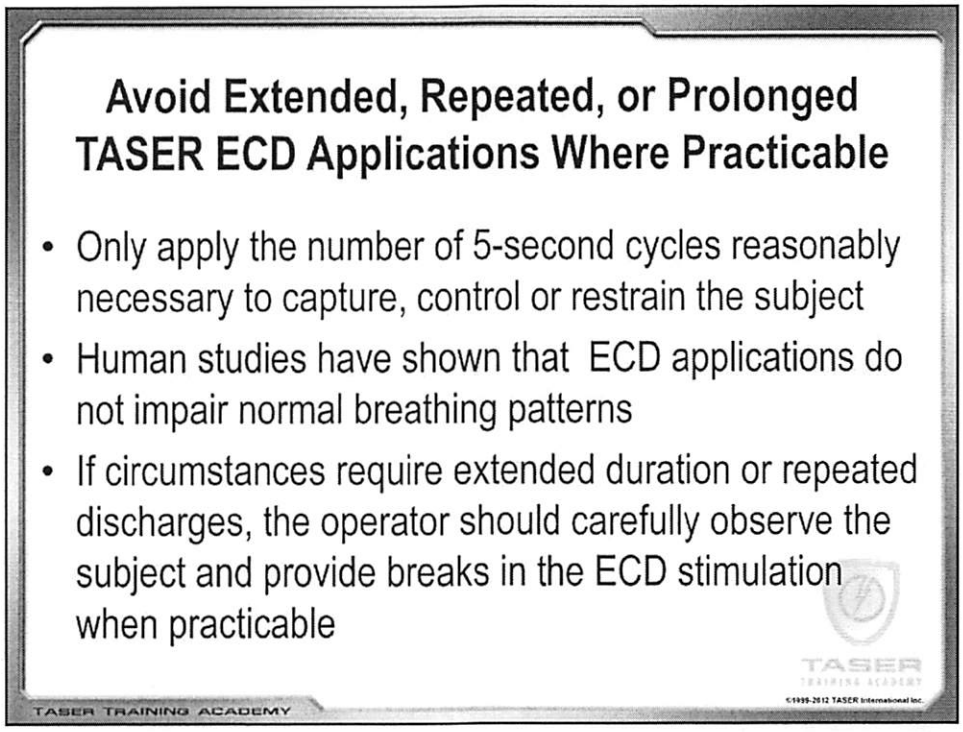


Remember, as with any application of force, each ECD 5 second cycle, deployment, or trigger pull must be legally justified.

1. Bozeman W, II WH, Heck J, Graham D, Martin B, Winslow J., Safety and Injury Profile of Conducted Electrical Weapons Used by Law Enforcement Officer Against Criminal Suspects, Annals of Emergency Medicine, January 2009, defines ECD discharge by duration as: "standard (5-second), prolonged (15-second), and extended (up to 45-second)" discharges.

Avoid extended, repeated or prolonged ECD applications where practical. Tests on human volunteers have shown that breathing continues during ECD stimulation. Prolonged application of 15 seconds continuous or with breaks every 5 seconds in a trans-diaphragm application did not significantly impair either the tidal volume or respiratory rate. However, in tests on anaesthetized pigs, the pigs did not breathe during ECD stimulation. It was also noted in these pig tests that changes in conscious pigs could be different from those observed in anaesthetized animals.

It is important to note the need for effective tactics while subduing and restraining subjects. As demonstrated by training videos and voluntary exposure, the ECD stimulation is a stressful physical exertion. It is advisable to minimize the number of ECD applications by working quickly to restrain the subject. If repeated ECD applications are not having the desired effect, for whatever reason, it may be reasonable to redeploy to a different location on the body or transition to another force option rather than continue to expose the subject to the stress of further ECD applications if these applications are not making progress toward the goals of capturing, controlling, or restraining the subject. This may be especially true when dealing with persons in a health crisis such as excited delirium. It is advisable to minimize the physical and psychological stress to the subject.


Avoid Extended, Repeated, or Prolonged TASER ECD Applications Where Practicable
• Only apply the number of 5-second cycles reasonably necessary to capture, control or restrain the subject
• Human studies have shown that ECD applications do not impair normal breathing patterns
• If circumstances require extended duration or repeated discharges, the operator should carefully observe the subject and provide breaks in the ECD stimulation when practicable
TASER
TASER TRAINING ACADEMY
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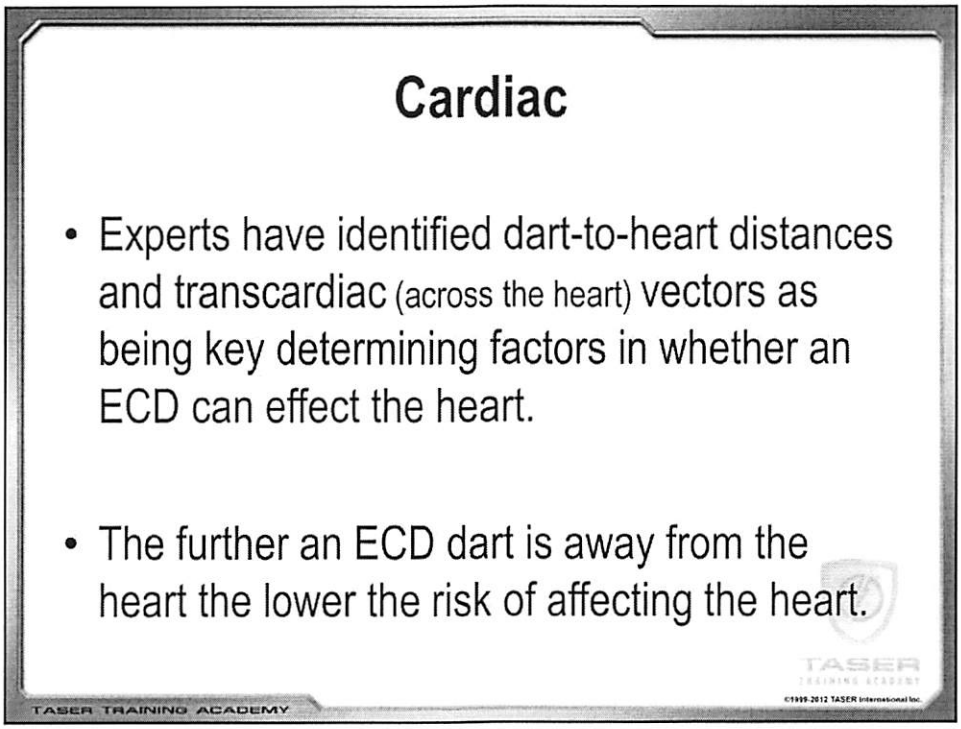
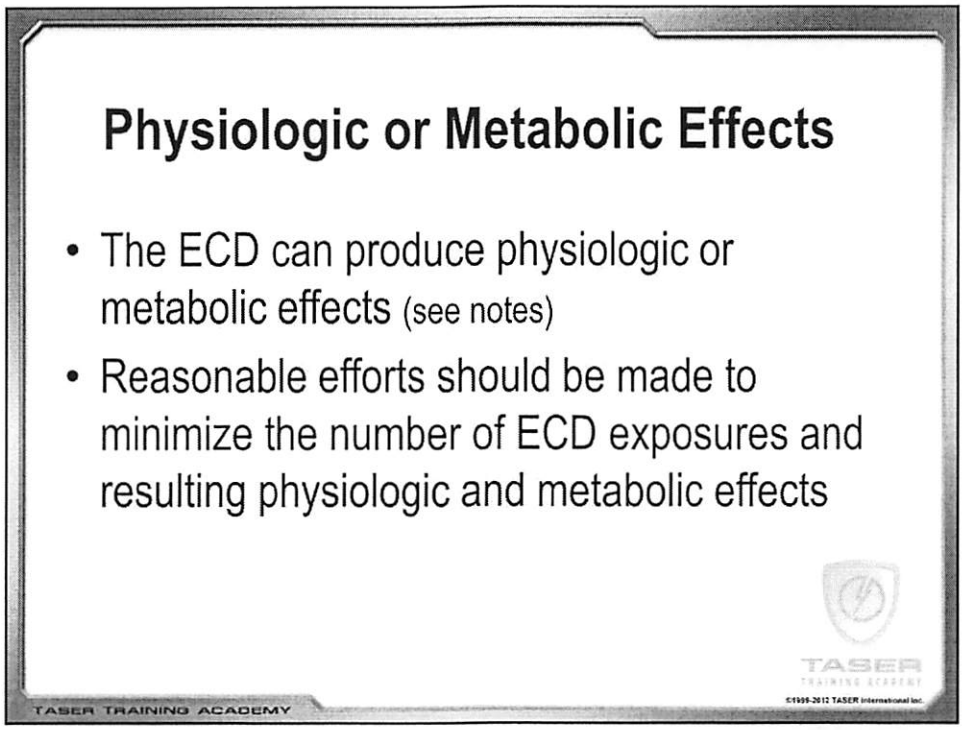


The VF probability for a given dart location decreased with the dart-to-heart horizontal distance (radius) on the skin surface. The further an ECD dart is away from the heart, the lower the risk of affecting the heart. The transcardiac vector (darts traversing or on both sides of the heart has also been stated as a potential concern.

Sun H, Haemmerich D, Rahko PS, Webster JG. Estimating the probability that the Taser directly causes human ventricular fibrillation. J Med Eng Technol. Apr 2010;34(3):178-191.

Also see:

- Kroll M, Lakkireddy D, Rahko P, Panescu D. Ventricular Fibrillation Risk Estimation for Conducted Electrical Weapons: Critical Convolutions. Medline IEEE 2011.
- McDaniel W, Stratbucker R, Nerheim M, Brewer JE. Cardiac safety of neuromuscular incapacitating defensive devices. Pacing Clin Electrophysiol. 2005 Jan;28 Suppl 1:S284-7. (The safety index for an NMI discharge was significantly and positively associated with weight. Discharge levels for standard electrical NMI devices have an extremely low probability of inducing VF.")



See current warnings, product manual, TASER training DVD, ECD Research Index, and www.TASER.com.

The ECD can produce physiologic or metabolic effects which include, but are not limited to, changes in: acidosis; adrenergic states; blood pressure; calcium, creatine kinase ("CK"); electrolytes (including potassium), heart rate and rhythm; lactic acid; myoglobin; pH; respiration; stress hormones or other biochemical neuromodulators (e.g., catecholamines).

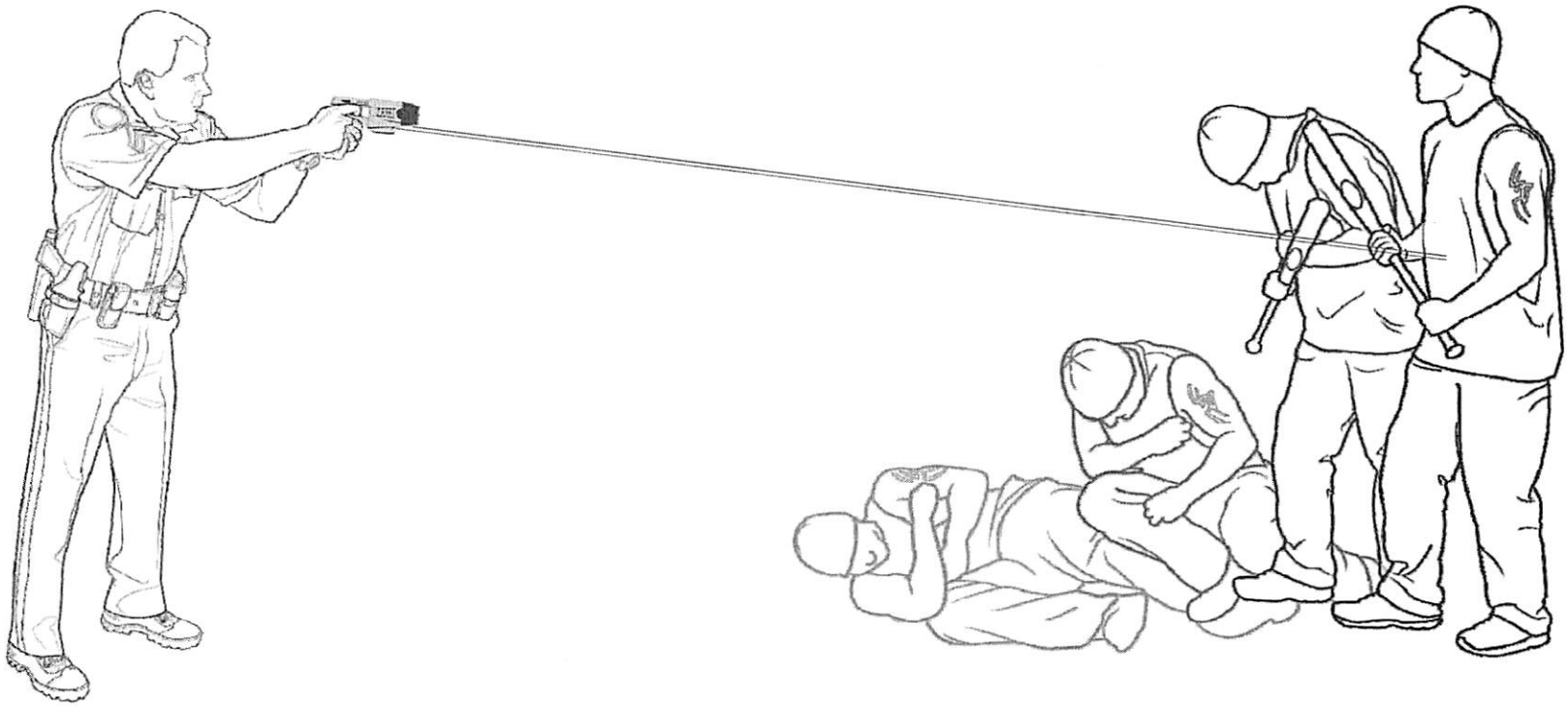
Electrical energy delivered to a human has been studied and reported in the peer-reviewed medical, scientific, electrical, and engineering research for three centuries. Thus, there is a large amount of published research on the effects of delivered electrical charge on a human.

Voluntary Exposure

- Exposure to NMI involves physical exertion similar to an athletic activity, e.g. weight lifting or wrestling. Risks of injury from physical exertion, falling, etc. while low, are not zero
- Notify instructor verbally and on waiver form of any pre-existing injuries, medical conditions, or individual susceptibilities
- All volunteers must review the TASER warnings and complete the liability waiver form prior to the exposure

Additional Force Factors

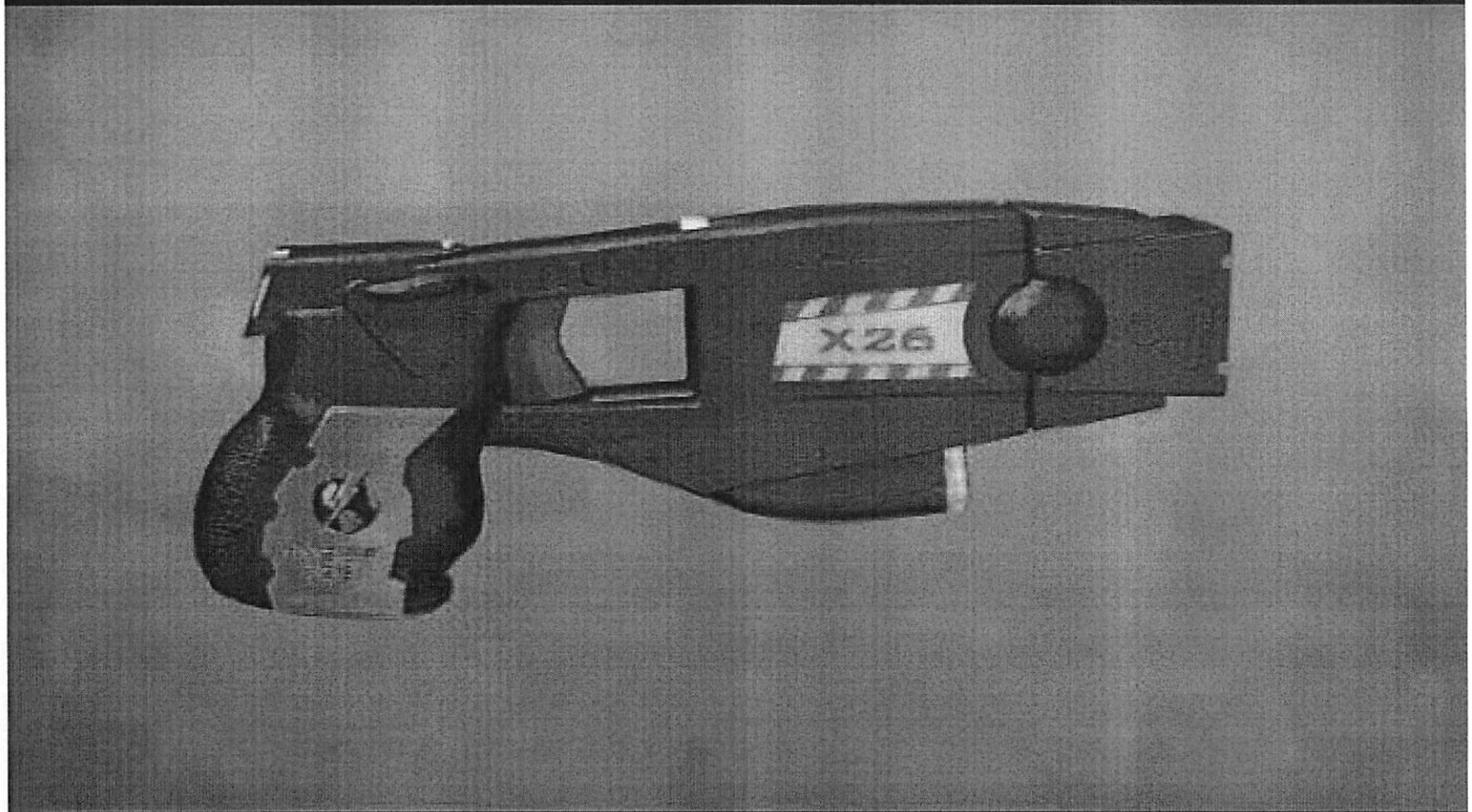
- Court may consider "the availability of [less injurious] alternative methods of capturing or subduing a suspect." (*Smith v. City of Hemet*, 394 F.3d 689, 701 (9th Cir.2005))
- Court may consider what officers knew about the suspect's health, mental condition, or other relevant frailties.* (*Deorle v. Rutherford*, 272 F.3d 1272, 1282-83 (9th Cir. 2001); *Franklin v. Foxworth*, 31 F.3d 873, 876 (9th Cir.1994))
- Officer should give a warning before force when appropriate.



Electronic Control Devices (ECD's) are designed to use propelled wires or direct contact to conduct energy to affect the sensory and/or motor functions of the nervous system.

The X26 is a software upgradable, ECD manufactured by TASER International, Inc.

Affect Command and Control



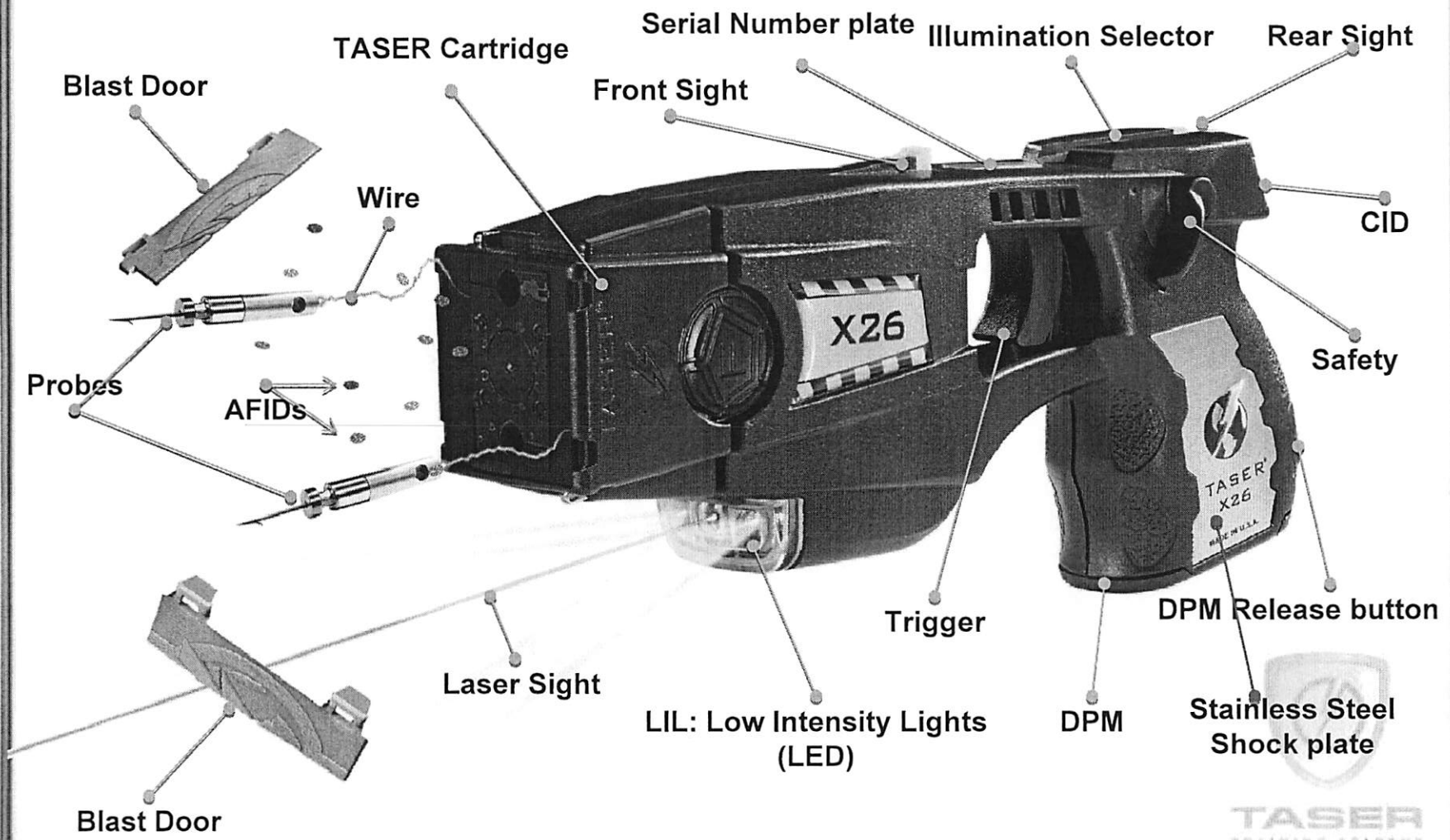
Goal: Impair Ability, Not Inflict Injury

Trigger Operation

- Single trigger pull and release discharges an electrical charge for a 5-second cycle
- Shift the Safety Switch down (SAFE) to stop a discharge (e.g., if accidentally discharged)
- Holding the trigger continuously beyond the 5-second cycle will continue the electrical discharge until the trigger is released. (The discharge will cease once the trigger is released after the initial 5-second cycle.)

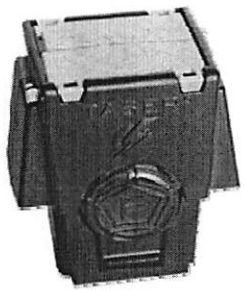
TASER X26

Constructed of impact resistant sonic welded polymer. Mass = 7 ounces.

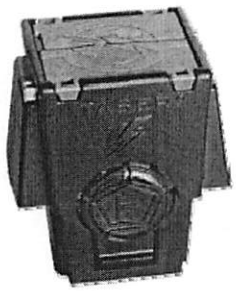


Cartridges

- TASER Cartridges are used in the X26, M26 and SHOCKWAVE ECDs
  - Available in 15, 21, 25 and 35 ft
- All TASER Cartridges have a 5 year expiration from date of manufacture

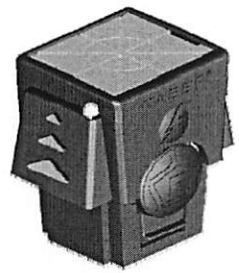


15 ft.
(4.6 meters)
Yellow Blast Doors
Live Cartridge
Regular Probe

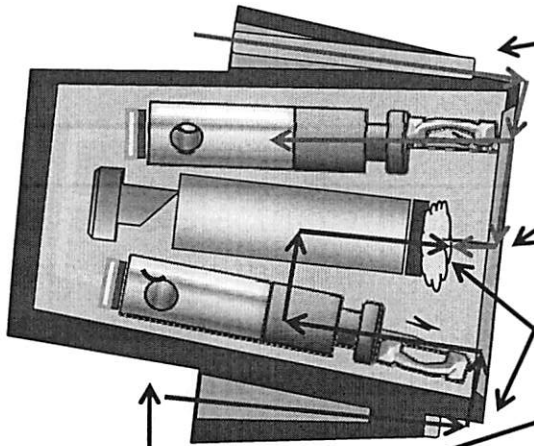


21 ft.
(6.4 meters)
Silver Blast Doors
Live Cartridge
Regular Probe

XP 25 ft.
(7.6 meters)
Green Blast Doors
Live Cartridge
XP Probe



XP 35 ft.
Special Duty
(10.67 meters)
Orange Door
Live Cartridge XP Probe



Electricity is conducted down the metal contacts and energizes ignition pin.

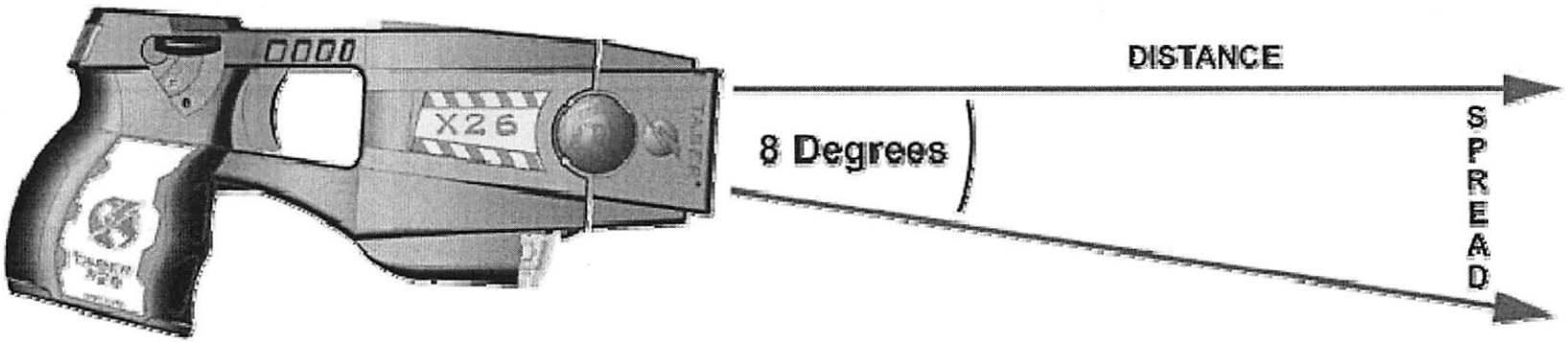
The electricity fires a small primer that forces the nitrogen capsule rearward into a hollow puncture pin that releases the compressed nitrogen into the probe chambers, which forces the probes out of the bores.

The blast doors, probes, probe wires, foam poron pads, ejectors and AFIDs are then propelled forward.

TASER TRAINING ACADEMY

TASER Cartridge Probe Spread For 15, 21 & 25 Foot Cartridges

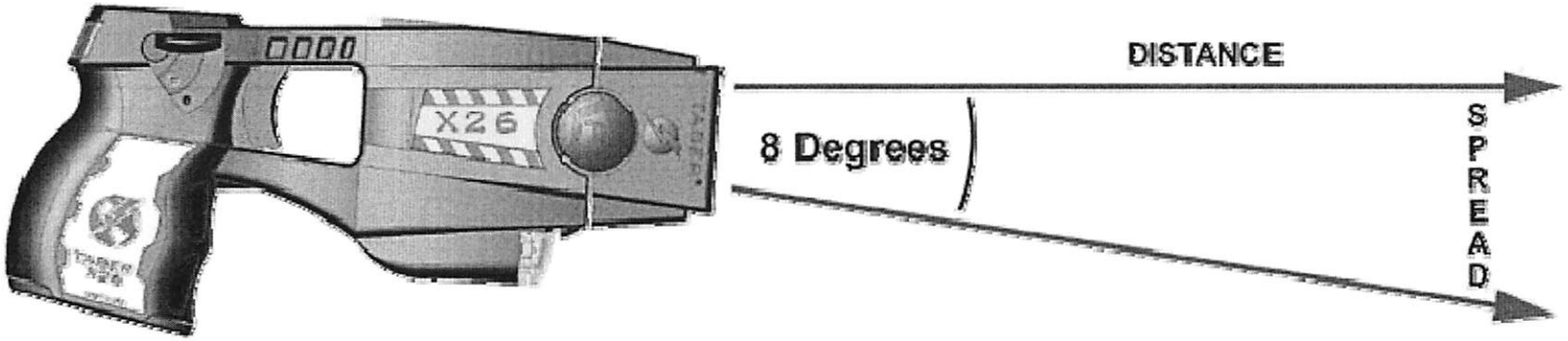
- Rule of thumb: ~1 foot (.3 m) spread for every 7 feet (2.1 m) of travel



	(m)	.6m	1.5m	2.1m	3m	4.5m	6.4m	7.6m
Target Distance (ft)		2′	5'	7'	10'	15′	21′	25′
Spread (in)		4″	9"	13"	18"	26"	36″	38″
	(cm)	10cm	23cm	33cm	46cm	66cm	91cm	109cm

TASER Cartridge Probe Spread For 15, 21 & 25 Foot Cartridges

- Rule of thumb: ~1 foot (.3 m) spread for every 7 feet (2.1 m) of travel



	(m)	.6m	1.5m	2.1m	3m	4.5m	6.4m	7.6m
Target Distance (ft)		2′	5'	7'	10'	15′	21′	25′
Spread (in)		4″	9"	13"	18"	26"	36″	38″
	(cm)	10cm	23cm	33cm	46cm	66cm	91cm	109cm

Warning

- Avoid intentionally targeting the ECD on sensitive areas of the body such as the head, throat, chest/breast, or known pre-existing injury areas without legal justification.
- The preferred target areas are the lower center mass (below chest) for front shots and below the neck area for back shots.

Probe Placement

- Deploy per department SOP
- Greater probe spread generally increases effectiveness
  - Narrow probe spreads typically are more effective if one probe is above the belt and the other probe is below the belt

Probe Placement

Electrical arc can penetrate SOME soft body armor and may jump up through clothing up to approximately 2 inches total or approximately 1 inch per probe

Controlling/Cuffing Under Power

- You can go hands on with the subject during the 5-second cycle without feeling the effects of the NMI
  - Electricity follows the path of least resistance
  - Do not place hands on or between probes

Controlling/Cuffing Under Power

- When feasible move in and control the subject while the TASER ECD is cycling and the subject is incapacitated
- EDPs, focused, intoxicated, excited delirium individuals, etc may not comply with verbal commands

Avoid Extended, Repeated or Prolonged TASER ECD Applications Where Practicable

- Avoid extended, repeated, or prolonged ECD applications where practical
- The application of the ECD is a physically stressful event
- Attempt to minimize the physical and psychological stress to the subject

Look for a Change in Behavior

- Look AND listen when evaluating the effectiveness of an ECD deployment
- Watch the subject's reaction and look for a change in their behavior
- Listen to the sound of the ECD
- Quiet pulsing typically indicates a good connection

Drive-Stun Backup

- Probe deployments are usually more desirable/effective than drive stuns (that are not three-point deployments)
- NMI vs. pain compliance
- Can be applied from a safer distance
- Usually require fewer cycles